Personal Conflict of Interest Disclosure Form Subcontractor Employees (September 10, 2020)

Prir	nt name and badge #:		
Brie	efly describe the work you perform for UT-Battelle:		
A Papr	AAT IS A PERSONAL CONFLICT OF INTEREST (PCOI)? COI arises when an individual who performs services for UT-Battelle has a personal or relational interest opears to create, or potentially creates conflicting motives, goals, or actions between: UT-Battelle's expectation is that individuals will be fair and objective in performing assigned duties; and The individual's personal interests or those of a spouse, significant other, children, or member of the inhousehold. Cause a PCOI can arise due to the mere appearance of a conflict or a potential conflict, the fact that a PC imply any wrongdoing. However, failure to report facts relevant to a PCOI is a serious violation of UT-Battelle has a personal or relational interests.	d ndividual's OI exists <u>do</u>	<u>oes</u>
	pectations for individuals in staff augmentation positions.	attelle s etil	iicai
	 Imples of PCOI's include – but are not limited to – the following situations: Having a close relative who works in the same ORNL organization as you. Making employment, business, contracting, or financial decisions that favor an individual you have a close of Using or disclosing non-public information from ORNL for personal benefit or for the benefit of a third party Receiving gifts from vendors who do work for, or seek to do work for, UT-Battelle. Using one's affiliation with ORNL as a basis for obtaining favors from vendors who do work, or seek to do well unauthorized use or misuse of ORNL equipment, funds, or other assets for personal benefit or gain. Working for UT-Battelle within the last 6 months. 	y.	
DIS	SCLOSURE OF PCOI INFORMATION		
	swer the following questions and, on the back of this form, provide <u>detailed</u> information that explains arbte: "Yes" answers will <u>not</u> disqualify you from working at ORNL unless the facts cannot be mitigated.)	าy "Yes" ans	swer.
1.	Do you have a financial interest or income from any entity that does business with UT-Battelle?	Yes	☐ No
2.	Does your spouse, child, significant other, or any member of your household work in the same ORNL organization as you? (If "Yes", provide name and ORNL phone number.)	Yes	☐ No
3.	Are you aware of any other facts or circumstances that could lead to a possible PCOI, including the appearance of a PCOI or a potential PCOI?	∐ Yes	∐ No
4.	Are you a retired employee of UT-Battelle, LLC? If yes, what was your separation date?	Yes	☐ No
exp agr rev	KNOWLEDGMENT: I certify that I have answered these questions to the best of my knowledge a planatory information provided on the reverse side (if any) is accurate and complete to the best of my knee to promptly submit a new PCOI Disclosure Form if any facts or circumstances arise in the future the rision of my answers on this form. Suestions regarding this form should be discussed with the ORNL Office of General Counsel (865) 241-49.	nowledge. <u>I</u> at would re	l further
Si	ignature Date		

Submit this form to your employer within 5 working days of commencing work for UT-Battelle.